Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	FILED -		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			1					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			η minus 20=		÷			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			رُّ mir	nus 3 =	*			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					-135=		OR	+270=		
* If	the difference	in column 1 is	ess than zero, enter "0"			olumn 2		OTAL		OR	TOTAL		
	C	LAIMS AS A	MENDED	D - PART II			'				OTHER THAN		
		(Column 1)	(Colun		The second second	the state of the s		SMALL ENTITY		OR	SMALL E	NTITY	
AMENDMENT A	няс с Д _{ер}	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-	;	X40=		OR	X80=	/	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM		-	135=		OR	+270=		
								TOTAL			TOTAL ADDIT. FEE	***	
(Column 1) (Column 2) (Column 3)								DIT. FEE (ADDIT. FEE		
AMENDWENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM	IEST IBER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	#	Minus	**		=	>	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	<u></u>		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	DLTIPLE DEF	ENDEN	CLAIM] -	135=		OR	+270=		
								TOTAL			TOTAL	The state of the s	
(Column 1) (Column 2) (Column 3)								OIT. FEE	<u></u>		ADDIT. FEE		
AMENDMENT C	1 4	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	,	(\$ 9=		OR	X\$18=		
	Independent	*	Minus]=	;	X40=		OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +1							135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR	TOTAL		
***	If the "Highest Nu	mber Previously Pa aber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	701		propriate box	,	ADDIT. FEE olumn 1.	<u> </u>	